

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>WJ</i>	3102	
O.I.P.E. CLASSIFIER	<i>Bill</i>	31197000	
FORMALITY REVIEW	<i>BB</i>	714801	5-10-00
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	12/1/92
2	✓	✓	5/7/93
3	✓	✓	7/5/93
4	✓	✓	7/5/93
5	✓	✓	7/5/93
6	✓	✓	7/5/93
7	✓	✓	7/5/93
8	✓	✓	7/5/93
9	✓	✓	7/5/93
10	✓	✓	7/5/93
11	✓	✓	7/5/93
12	✓	✓	7/5/93
13	✓	✓	7/5/93
14	✓	✓	7/5/93
15	✓	✓	7/5/93
16	✓	✓	7/5/93
17	✓	✓	7/5/93
18	✓	✓	7/5/93
19	✓	✓	7/5/93
20	✓	✓	7/5/93
21	✓	✓	7/5/93
22	✓	✓	7/5/93
23	✓	✓	7/5/93
24	✓	✓	7/5/93
25	✓	✓	7/5/93
26	✓	✓	7/5/93
27	✓	✓	7/5/93
28	✓	=	
29		=	
30		=	
31	✓	=	
32	✓	=	
33	✓	=	
34	✓	=	
35	✓	=	
36	✓	=	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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